Division of Licensing and Protection 103 South Main Street, Ladd Hall Waterbury, VT 05671-2306 http://www.dail.vermont.gov Voice/TTY (802) 871-3317 To Report Adult Abuse: (800) 564-1612

Fax (802) 871-3318

April 17, 2014

Kim Russell-Peck, Administrator Kirby House, Inc. 64 South Main Street Waterbury, VT 05676-1517

Provider #:

Dear Ms. Russell-Peck:

The Division of Licensing and Protection conducted an onsite complaint investigation on **April 15, 2014**. The purpose of the investigation was to determine if your facility was in compliance with Federal participation requirements of the Medicare/Medicaid Program. The investigation was completed on **April 15, 2014** and there were no regulatory violations related to the complaint allegations.

Sincerely.

Pamela M. Cota, RN

amlaMCHaRN

Licensing Chief

PC:il

Enclosure

Division of Licensing and Protection (X1) PROVIDER/SUPPLIER/CLIA STATEMENT OF DEFICIENCIES (X2) MULTIPLE CONSTRUCTION (X3) DATE SURVEY AND PLAN OF CORRECTION IDENTIFICATION NUMBER: COMPLETED A. BUILDING: ___ C B. WING 0058 04/15/2014 NAME OF PROVIDER OR SUPPLIER STREET ADDRESS, CITY, STATE, ZIP CODE **64 SOUTH MAIN STREET** KIRBY HOUSE, INC. WATERBURY, VT 05676 SUMMARY STATEMENT OF DEFICIENCIES PROVIDER'S PLAN OF CORRECTION (X5) COMPLETE DATE (X4) ID PREFIX (EACH DEFICIENCY MUST BE PRECEDED BY FULL PREFIX (EACH CORRECTIVE ACTION SHOULD BE REGULATORY OR LSC IDENTIFYING INFORMATION) TAG CROSS-REFERENCED TO THE APPROPRIATE TAG DEFICIENCY) R100 Initial Comments: R100 An unannounced onsite investigation of one entity report and one complaint was completed by the Division of Licensing and Protection on 4/15/14. The home was found in substantial compliance with regulations related to the allegations in the self report and the complaint.

Division of Licensing and Protection LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE